Case 19-32708-KCF Doc 77 Filed 08/24/21 Entered 08/24/21 12:10:57 Desc Main Document Page 1 of 7

Fill in this information to identify your case:								
Pietro O. Degrand	de							
First Name	Middle Name	Last Name						
First Name	Middle Name	Last Name						
Bankruptcy Court for the:	DISTRICT OF NEW JE	RSEY TRENTON VICINAGE						
19-32708-MBK								
	Pietro O. Degrand First Name First Name Bankruptcy Court for the:	Pietro O. Degrande First Name Middle Name First Name Middle Name Bankruptcy Court for the: DISTRICT OF NEW JE	Pietro O. Degrande First Name Middle Name Last Name First Name Middle Name Last Name Bankruptcy Court for the: DISTRICT OF NEW JERSEY TRENTON VICINAGE					

Check if this is an amended filing

12/15

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

info	is complete and accurate as possible. If two married people are filing together, both are equally responsible formation. Fill out all of your schedules first; then complete the information on this form. If you are filing amender original forms, you must fill out a new <i>Summary</i> and check the box at the top of this page.		
Par	t 1: Summarize Your Assets		
		Your a	assets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	271,906.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	53,340.50
	1c. Copy line 63, Total of all property on Schedule A/B	\$	325,246.50
Par	t 2: Summarize Your Liabilities		
			iabilities nt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	453,996.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	13,500.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	9,327.00
	Your total liabilities	\$	476,823.00
Par	t3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	3,188.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	5,934.00
Par	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ır other sc	hedules.
7.	Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.	a personal	, family, or

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

the court with your other schedules.

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Debtor 1 Pietro O. Degrande Case number (if known) 19-32708-MBK

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$______\$

O. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total c	aim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	13,500.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) 	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	13,500.00

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E-111	to the total and the state of t					i			
	in this information to identify your captor 1 Pietro O. De								
	otor 2 use, if filing)	_			_				
Uni	ted States Bankruptcy Court for the	: DISTRICT OF NEW J	IERSEY TRENTON V	/ICINAGI	<u> </u>				
Cas	se number 19-32708-MBK					Check if th	is is:		
l	nown)		=			_	ended filing		
						☐ A supp	element show	ring postpetition following date:	
O	fficial Form 106I					ММ / Г	DD/ YYYY		
S	chedule I: Your Inc	ome				IVIIVI / L	ווו /טל		12/15
spo atta	plying correct information. If you use. If you are separated and you ch a separate sheet to this form. Describe Employment	r spouse is not filing wi	ith you, do not inclu	de infori	mati	on about you	r spouse. If r	more space is	needed,
1.	Fill in your employment information.		Debtor 1			Deb	tor 2 or non-	-filing spouse	
	If you have more than one job,	☐ Employed			☐ Employed				
	attach a separate page with information about additional employers.	Employment status	■ Not employed			1 🗆	Not employed		
		Occupation	Unemployed						
	Include part-time, seasonal, or self-employed work.	Employer's name							
	Occupation may include student or homemaker, if it applies.	Employer's address							
		How long employed t	here?						
Par	t 2: Give Details About Mor	nthly income							
spou If yo	mate monthly income as of the dause unless you are separated. u or your non-filing spouse have more space, attach a separate sheet to	ate you file this form. If	,		•		·	•	J
						For Debtor		ebtor 2 or iling spouse	
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$	0	.00 \$	N/A	
3.	Estimate and list monthly overt	ime pay.		3.	+\$	0	.00 +\$ _	N/A	
4.	Calculate gross Income. Add lin	ne 2 + line 3.		4.	\$	0.00	\$	N/A	

Deb	otor 1	Pietro O. Degrande			Case	e number (if kno	wn)	19-3	2708-N	IBK	
					Fo	r Debtor 1			Debtor		
	Cop	y line 4 here	4.		\$_	0.	00	\$	9	N/A	_
5.	List	all payroll deductions:									
٥.	5a.	Tax, Medicare, and Social Security deductions	58	2	\$	0	00	\$		N/A	
	5a. 5b.	Mandatory contributions for retirement plans	5k		\$ -		00	\$ —		N/A N/A	_
	5c.	Voluntary contributions for retirement plans	50		\$-		00	* *		N/A	_
	5d.	Required repayments of retirement fund loans	50		\$		00	\$_		N/A	_
	5e.	Insurance	56		\$		00	\$_		N/A	_
	5f.	Domestic support obligations	5f		\$		00	\$_		N/A	_
	5g.	Union dues	50	g.	\$		00	\$		N/A	_
	5h.	Other deductions. Specify:		า.+	\$			+ \$		N/A	_
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	_ 6.		\$	0.	00	\$		N/A	-
7.	Cald	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$		00	\$		N/A	-
8.	8a. 8b. 8c.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. Interest and dividends Family support payments that you, a non-filing spouse, or a dependent	8a 8b		\$_ \$_		00 00	\$_ \$_		N/A N/A	_
		regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	80	Э.	\$_		00	\$_		N/A	_
	8d.	Unemployment compensation	80	d.	\$_	2,328.	00	\$		N/A	_
	8e.	Social Security	86	€.	\$_	0.	00	\$		N/A	_
	8f. 8g.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income	_ 8f _ 8g		\$_ \$		00 00	\$_ \$		N/A N/A	_
	8h.	Other monthly income. Specify:	-	ง. า.+	\$			+ \$-		N/A	_
	····									14/7	-
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.		\$	2,328.	00	\$_		N/A	A
10.		culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$_		2,328.00	+ \$_		N/A	= \$	2,328.00
11.	Inclu othe Do r	e all other regular contributions to the expenses that you list in Schedule and contributions from an unmarried partner, members of your household, your refriends or relatives. Not include any amounts already included in lines 2-10 or amounts that are not a cify: Contribution from fiancee	dep						Schedule 11.		860.00
12.		the amount in the last column of line 10 to the amount in line 11. The rest e that amount on the Summary of Schedules and Statistical Summary of Certain ies							12.	\$	3,188.00
13.	Do y	ou expect an increase or decrease within the year after you file this form? No.	?							Combi	ned y income
	_	Ves Explain:									

Official Form 106l Schedule I: Your Income page 2

Fill i	in this information to identify your case:	·				
Debt	tor 1 Pietro O. Degrande			Chec	k if this is:	
					An amended filing	
Debt (Spo	tor 2				A supplement show 13 expenses as of	ving postpetition chapter the following date:
Unite	ed States Bankruptcy Court for the: DISTRICT VICINAGE	OF NEW JERSEY TRE	NTON	1	MM / DD / YYYY	
	e number 19-32708-MBK					
	ficial Form 106J					
	chedule J: Your Expens					12/1
info	as complete and accurate as possible. If brination. If more space is needed, attach nber (if known). Answer every question. 1: Describe Your Household Is this a joint case? No. Go to line 2. Yes. Does Debtor 2 live in a separate	another sheet to this f				
	☐ Yes. Debtor 2 must file Official	Form 106J-2, Expenses	for Separate House	hold of Debte	or 2.	
2.	Do you have dependents? \square No					
	Yes	ill out this information for ach dependent	Dependent's relation Debtor 1 or Debtor		Dependent's age	Does dependent live with you?
	Do not state the dependents names.		Fiancee			□ No ■ Yes □ No
			Daughter		2	■ Yes □ No □ Yes □ No
						☐ Yes
3.	Do your expenses include expenses of people other than yourself and your dependents? ■ No					
exp	Estimate Your Ongoing Monthly I imate your expenses as of your bankruptenses as of a date after the bankruptcy i licable date.	tcy filing date unless ye				
the	ude expenses paid for with non-cash go value of such assistance and have inclu icial Form 106l.)				Your expe	enses
4.	The rental or home ownership expense payments and any rent for the ground or ke		nclude first mortgage	4. \$		2,800.00
	If not included in line 4:					
	4a. Real estate taxes			4a. \$		0.00
	4b. Property, homeowner's, or renter's i	insurance		4b. \$		0.00
	4c. Home maintenance, repair, and upk			4c. \$		0.00
_	4d. Homeowner's association or condor			4d. \$		0.00
5.	Additional mortgage payments for your	r residence , such as hor	ne equity loans	5. \$		0.00

ebtor 1	Pietro O. Degrande	Case num	ber (if known)	19-32708-MBK
. Utilit	es:			
6a.	Electricity, heat, natural gas	6a.	\$	220.00
6b.	Water, sewer, garbage collection	6b.	\$	0.00
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	190.00
6d.	Other. Specify: Cell Phone	6d.	\$	190.00
Food	and housekeeping supplies		\$	500.00
Child	care and children's education costs	8.	\$	0.00
Cloth	ing, laundry, and dry cleaning	9.	\$	0.00
. Pers	onal care products and services	10.	\$	0.00
Medi	cal and dental expenses	11.	\$	0.00
	sportation. Include gas, maintenance, bus or train fare.			
	ot include car payments.	12.	\$	285.00
. Ente	tainment, clubs, recreation, newspapers, magazines, and books	13.	\$	0.00
. Char	table contributions and religious donations	14.	\$	0.00
. Insur	ance.			
	t include insurance deducted from your pay or included in lines 4 or 20.			
	Life insurance	15a.	·	188.00
	Health insurance	15b.		0.00
15c.	Vehicle insurance	15c.	\$	370.00
	Other insurance. Specify:	15d.	\$	0.00
	5. Do not include taxes deducted from your pay or included in lines 4 or 20.			
Spec		16.	\$	0.00
	Ilment or lease payments:	4-	•	
	Car payments for Vehicle 1	17a.	·	592.00
	Car payments for Vehicle 2	17b.	·	0.00
	Other. Specify: Harley Payment	17c.		599.00
	Other. Specify:	17d.	\$	0.00
	payments of alimony, maintenance, and support that you did not report as	18.	Φ.	0.00
	cted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	10.	\$	
Spec	r payments you make to support others who do not live with you.	19.	Φ	0.00
	ry real property expenses not included in lines 4 or 5 of this form or on <i>Sch</i> e		ur Incomo	
	Mortgages on other property	20a.		0.00
	Real estate taxes	20b.	·	0.00
		20b. 20c.	·	
	Property, homeowner's, or renter's insurance	20d.		0.00
	Maintenance, repair, and upkeep expenses Homeowner's association or condominium dues			0.00
		20e.	· -	0.00
. Othe	: Specify:	21.	+\$	0.00
. Calci	llate your monthly expenses			
22a.	Add lines 4 through 21.		\$	5,934.00
22b.	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$,
	Add line 22a and 22b. The result is your monthly expenses.		\$	5,934.00
220. /	and the 22d and 22b. The result is your monthly expenses.		Ψ	3,934.00
3. Calcı	ılate your monthly net income.			
23a.	Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	3,188.00
23b.	Copy your monthly expenses from line 22c above.	23b.	-\$	5,934.00
				·
23c.	Subtract your monthly expenses from your monthly income.		•	2746.00
	The result is your monthly net income.	23c.	Φ	-2,746.00
For ex modifi	ou expect an increase or decrease in your expenses within the year after your ample, do you expect to finish paying for your car loan within the year or do you expect your carloon to the terms of your mortgage?			ease or decrease because of
■ No).			
□ Ye	s. Explain here:			

Fill in this information to identify your case:						
Debtor 1	Pietro O. Degrand	le				
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States Bankruptcy Court for the:		DISTRICT OF NEW JE	RSEY TRENTON VICINAGE			
_	19-32708-MBK					
(if known)						

Check if this is an amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below	
Did you pay or agree to pay someone who is N	NOT an attorney to help you fill out bankruptcy forms?
■ No	
Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)
Under penalty of perjury, I declare that I have rethat they are true and correct. X /s/ Pietro O. Degrande Pietro O. Degrande Signature of Debtor 1	ead the summary and schedules filed with this declaration and X Signature of Debtor 2
Date August 24, 2021	Date